FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ngton, D.C. 20549	OMB APPROVAL
	ll entered

	OMB APPRO	JVAL	
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287	
on the control of the	Estimated average burden		

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0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Secti	ion 30(h) of the	e Inve	estmen	t Com	pany Act c	of 19	940						
Name and Address of Reporting Person* LEE KENNETH B JR					2. Issuer Name and Ticker or Trading Symbol BIOCRYST PHARMACEUTICALS INC [BCRX]									ck all applica Director	tionship of Reporting all applicable) Director Officer (give title below)		10% Ow	wner
(Last) (First) (Middle) 4505 EMPEROR BLVD., SUITE 200				3. Date of Earliest Transaction (Month/Day/Year) 05/23/2012										Other (sp				
Street) DURHA (City)			27703 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc Line)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tal	ole I - Nor	n-Deriva	ative Se	curities Ac	cqu	ired,	Disp	osed of	f, o	r Bene	ficially	Owned				
Title of Security (Instr. 3) 2. Transa Date (Month/E			Execution Date,		•,	3. Transaction Code (Instr. 8) 4. Securitie Disposed (5) 5)							rities F eficially (ed Following (Direct III	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount		(A) or (D)	Price	Reported Transacti (Instr. 3 a	ion(s)		"	instr. 4)	
						urities Acq s, warrants								Owned				
Title of Derivative Security Instr. 3)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		ate, Tr	ansaction ode (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Exp	Expiration Date (Month/Day/Year)				7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Date

Exercisable

06/23/2012(2)

(D)

Expiration Date

05/23/2022

Title

Stock

Explanation of Responses:

\$3.32

Automatic Stock Option

Grant⁽¹⁾

- $1. \ Automatic \ non-employee \ director \ grant \ pursuant \ to \ the \ Bio Cryst \ Pharmaceuticals, Inc. \ Stock \ Incentive \ Plan \ (the \ "Plan").$
- 2. Vest 1/12 per month over 12 months beginning June 23, 2012

05/23/2012

/s/ Michael Richardson, by power of attorney

or Number

15,000

\$<mark>0</mark>

05/24/2012

15,000

D

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

Α

(A)

15,000

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.